

CMS Manual System

Pub 100-04 Medicare Claims Processing

Transmittal 499

Department of Health &
Human Services

Center for Medicare and &
Medicaid Services

Date: MARCH 11, 2005

Change Request 3746

SUBJECT: 2005 Scheduled Release for April Updates to Software Programs and Pricing/Coding Files

I. SUMMARY OF CHANGES: This CR is informational only. There are no system changes associated with this CR.

NEW/REVISED MATERIAL :

EFFECTIVE DATE : April 11, 2005

IMPLEMENTATION DATE : April 11, 2005

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R = REVISED, N = NEW, D = DELETED

R/N/D	Chapter / Section / SubSection / Title
N/A	

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.

IV. ATTACHMENTS:

Recurring Update Notification

**Unless otherwise specified, the effective date is the date of service.*

Attachment – Recurring Update Notification

Pub. 100-04	Transmittal: 499	Date: March 11, 2005	Change Request 3746
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SUBJECT: 2005 Scheduled Release for April Updates to Software Programs and Pricing/Coding Files

I. GENERAL INFORMATION

A. Background: The managed module for software programs and pricing/coding files is updated quarterly. It is informational only and has no systems impact.

B. Policy: N/A

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement
"Should" denotes an optional requirement

[illegible]

III. PROVIDER EDUCATION

[illegible]

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: April 11, 2005 Implementation Date: April 11, 2005 Pre-Implementation Contact(s): Joe Bryson at jbryson2@cms.hhs.gov or 410-786-2986 Post-Implementation Contact(s): Regional Office	No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.
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Attachment

Attachment

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
IPPS PRICER	3/4	Updates rates and DRGs.	Semi-annual – (October and April)
IRF PRICER	no April update	Not applicable.	Annual - (October)
LTCH PRICER	no April update	Not applicable.	Semi-annual – (July and October)
OPPS PRICER	3/10	Updates to APC rates, wage indices and new logic.	Quarterly
HHA PRICER	no April update	Not applicable.	Annual - (January)
ASC PRICER	no April update	Not applicable.	Semi-annual – (October and January)
SNF PRICER	no April update	Not applicable.	Annual - (October)
Hospice PRICER	no April update	Not applicable.	Annual – (October)
IPF PRICER	2/17	First release of PSYCH Pricer. Updates the per diem (using the excluded hospital with capital market basket), wage index and fixed dollar loss threshold.	Annual
ESRD PRICER	2/14	First release of ESRD Pricer. Updates adjustment factors based on patient classifications, wage index and drug add-on.	Annual – (January)
ASP Pricing File	3/17	Update containing payment amounts for covered drugs.	Quarterly

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
OPPS OCE	3/4	Changes to CMS coding, edits, flags, APCs, status indicator descriptions and logic.	Quarterly
Non-OPPS OCE	3/4	Changes to codes, ASC payment groups edits and logic.	Quarterly
Inpatient GROUPEr	no April update	Not applicable.	Annual – (October)
MCE	no April update	Not applicable.	Annual – (October)
Zip Code File	2/16	Update of zip codes for ambulance reporting.	Quarterly
Clinical Diagnostic Laboratory Edit Table	no April update	Not applicable.	Quarterly
MPFSDB	2/9	Update to fee schedule.	Quarterly
MPFSDB Abstract File (Therapy/ CORF/CAH)	2/9	Update to fee schedule.	Quarterly
Supplemental File (Therapy/ CORF)	2/9	Updates fee schedule services and their related prices.	Quarterly
Hospice File for RHHIs	2/9	Update to fee schedule.	Quarterly

Note: All dates on the above table are for 2005.

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
Mammo- graphy Benefit Pricing File	2/9	Update to fee schedule.	Quarterly
SNF Extract of the MPFSDB	2/9	Update to fee schedule.	Quarterly
Railroad Board File	2/9	Update to fee schedule.	Quarterly
MPFS National Abstract File for Purchased Diagnostic Tests and Inter- pretations	2/9	Update to codes. Allows carriers to accept and process claims for purchased diagnostic tests/interpretations billed by suppliers regardless of location.	Quarterly
DMEPOS Fee Schedule	DMERC & Carrier – 2/14 FI – 2/21	Update to fee schedule.	Quarterly
Clinical Diagnostic Lab Fee Schedule	no April update	Not applicable.	Annual
Ambulance Fee Schedule File	no April update	Not applicable.	Annual
HCPCS	no April update	Not applicable.	Annual – (January)

The PRICER software will be made available for retrieval from CMS's Mainframe Telecommunications System. Shared System maintainers will be notified via e-mail when the software is available and will notify you via routine bulletins when they release the PRICER software to you.

The pricing/coding files will be available for retrieval from CMS's Mainframe Telecommunication System. You will be notified in future notifications of when the pricing/coding files will be available.

Acronyms:

APC – Ambulatory Payment Classification
ASC – Ambulatory Surgical Center
ASP – Average Sale Price
BIPA – Benefits Improvement and Protection Act
CAH – Critical Access Hospital
CMHC – Community Mental Health Center
CORFs – Comprehensive Outpatient Rehabilitation Facilities
CY – Calendar Year
DMEPOS – Durable Medical Equipment Prosthetic Orthotic and Supply
DRGs – Diagnosis Related Groups
ESRD – End Stage Renal Disease
HHA – Home Health Agency
HCPCS – Healthcare Common Procedure Coding System
ICD-9-CM – International Classification of Disease, 9th Revision, Clinical Modification
IPPS – Inpatient Prospective Payment System
IPF – Inpatient Psychiatric Facility
IRF – Inpatient Rehabilitation Facility
LTCH – Long Term Care Hospital
MCE – Medicare Code Editor
MPFSDB – Medicare Physician Fee Schedule Database
NWI – New Wage Indexes
OCE – Outpatient Code Editor
OPPS – Outpatient Prospective Payment System
RHHIs – Regional Home Health Intermediaries
SNF – Skilled Nursing Facilities